## **TEACHING AND LEARNING ETHICS**

## Law and ethics support for health professionals: an alternative model

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ollowing surveys identifying the need for ongoing learning in relation to law and ethics amongst health professionals, the Law and Ethics Education and Development (LEED) initiative was launched. This was a programme of education designed for, and delivered to, health professionals working within the National Health Service (NHS), UK, with the added value of multiprofessional learning amongst colleagues from a single institution. The initiative was funded by the NHS Executive and provided for two lecturers to work for three years within the northwest region. The lecturers, an academic lawyer based at the University of Liverpool, and an ethicist based at the University of Manchester worked in collaboration through the auspices of the Institute of Medicine Law and Bioethics. A central thrust of this initiative was the delivery of the "Introduction to Health Care Law and Ethics" study day. This was delivered to as many NHS trusts, primary care groups/ trusts as possible during the course of the funded period. The aims of this course included extending the participant's knowledge of:

- relevant areas of law
- ethical theory and its relevance to health care
- models of ethical decision making.

The initiative was also able to respond to ad hoc requests in response to specialist need and current events which included:

- organ and tissue retention
- the regulation of the professions
- clinical and research ethics
- end of life issues.

The teaching strategy utilised a number of learning methods including self-directed, lecture format, and problem based learning methods, supported by high quality learning materials in the form of printed resource packs and PowerPoint presentations.

The delivery to multiprofessional groups evaluated well and personal gains in knowledge, confidence in discussing ethical issues, and communication with colleagues were also noted. Between 74% and 100% of participants rated the educational value of the day as "excellent", and between

84% and 100% rated the day as either "effective" or "very effective" in terms of influence on professional practices. The core subjects of the day, consent, confidentiality, and culpability, were regarded as intrinsically important and relevant because of the connection with clinical governance, data protection, and human rights. Participants also valued the fact that the day encouraged direct reflection on the moral nature of healthcare practice with colleagues and the personal virtues necessary for good practice. The majority of suggested changes concerned the amount of time devoted to the course; many suggested holding the course over a number of days and stated the need for follow up sessions either to consolidate the learning gained from this event or to address new issues. There were many requests for days on specialist themes directed at mental health professionals, child health professionals, and community health profes-

During a three year period, and presuming a 40 week per annum teaching period, LEED delivered approximately one event every two weeks. We consider this a poor use of the resource, reflecting a number of difficulties faced in delivering the programme. By far the biggest barrier to frequency and distribution of events was the logistics of making contact with NHS trusts in the first instance, identifying the appropriate person in the trust and then convincing the trust to participate in the initiative. Even though the teaching time and materials were offered free to the participating trusts, many were reluctant to participate. This initiative has now ceased its activities despite the fact that in these post-Bristol days the need for all health professionals to have access to education in law and ethics is not a matter of dispute.

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